

REPORT OF RECEIPTS AND EXPENDITURES -

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

IS THIS AN AMENDMENT?

2007 JA 12 PM 1: 10

(CFA-4) Summary Sheet

FILE NUMBER

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse side.

Yes

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TOTAL PAGES IN ENTIRE CFA-4 REPORT

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COMMITTEE INFORMATION					
Full Name of Committee (as on Statement of Organization) Check if this is a new to the committee of th	name		JACOSEC S		
JUDY LEVINE FOR COUNTY COUNCIL	_	BITAMORAS			
Acronym or Abbreviated Name (If any)	3. Committee	HIATHE.			
person francis and his orderedded and a person or recent and	(317) 842-3929				
4. Mailing Address (address where all campaign finance correspondence is received) CINCLE	heck if this is a	new address			
5. City, State, ZIP Code 7 N 46037		ation (if applicable)	,		
11314600, 1	RepubliCAN				
CANDIDATE INFORMATION (For Candidate's C	committees O	nly)			
7. Full Name of Candidate (include any nickname) Tudy R. LEVINE	Party Affiliation or If Independent Candidate				
Office Sought (Include district number, if any. Not required for exploratory committee.)	10. County of Residence				
TYPE OF REPORT		CONVENTIO	N CANDIDATES ONLY		
11. Check one:		Check one:			
☐ Pre-Primary ☐ Pre-Election ☑ Annual ☐ Nomination ☐ Other		Pre-Conv	vention		
Final/Disbands Committee (lines 18, 19, and 20 must be "0") Outgoing Treasurer (within 10 days amend Statement of Organization)					
12. Reporting Period:		COLUMN A	COLUMN B		
From: 16-14-06 Through: 12-31-08		This Period	Year to Date		
13. Cash on hand and investments at the beginning of this reporting period.	5	,005,98			
14. Cash on hand and investments January 1, current year.			5,005,98		
CONTRIBUTIONS AND RECEIPTS			ALC: THE STATE OF		
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)					
15a. Itemized (use Schedule A)		0			
15b. Unitemized					
	TOTAL	-0			
	TOTAL 5	,005,98	5,005.98		
EXPENDITURES					
(Note: These amounts include in-kind expenditures and loan repayments.)					
17a. Itemized (use Schedule B) (Public Question: use Schedule C)	5	,005,98	5,005.98		
17b. Unitemized			- 75		
17c. Add lines 17a and 17b in both columns	STOTAL 5	005.98	5,005.98		
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)	TOTAL	0	0		
19. Debts OWED BY the committee (use Schedule D)		0			
20. Debts OWED TO the committee (use Schedule E)		0			
CENTIFICATION		emureneusland :	OND OFFICE HISE ONLY		

Signature on File

files a fragefulent report obfirmits a Class D felony. (IC 3-14-1-13) A person who fails to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class B misdemeanor, (IC 3-14-1-14) and may be subject to civil penalties. (IC 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18)



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE D) DEBTS OWED BY THIS COMMITTEE

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, regardless of the amount, OWED BY the committee during the reporting period. Include all amounts owed for or to lend institutions, individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

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CREDITOR'S OR LENDER'S NAME & MAILING ADDRESS (street, number, city, state, ZIP code)	ENDORSER'S OR VENDOR'S NAME & MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	AMOUNT	DATE DEBT INCURRED	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
		NATURE OF DEBT			
1 + 1 = U.NE		LOAN		No Remarks	
Judy OR HALLEVILLE	Secured by excited entity. For a	Copyr	Dance Code		-0-
JUDY OR ART LEVINE 11536 GLEN RIDGE CIR FISHERS, DX 46037	White the hill had liber	BO PODRINI BING HARD	esser II nose 'a' column.	5,000.00	5,000 A
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REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

FILE NUMBER				
Page	of			

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
	OFFICE SOUGHT (if applicable)	and PURPOSE (be specific)			
NO CODE CODE LISTED TUDY LEVINE 11536GENRIDGE CIR FISHERS, IN 46037	Councilwompy	Direct In-Kind Payment of Debt Returned Contribution Other LOAN Purgose	5,000.00	5,000.00	12-31-06
PAPKINSONS FOUNDATION POO. BOX 96268 WASH. D.C., 20017	CHARITY	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: 73 Close ACCOUNT	5,98	5.98	12-31-06
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for the tracers and see to another scale	SUBTOTAL THIS PA	GE OF SCHEDULE B	\$ 5005.98		
	AGES OF SCHEDULE B ON TH (Enter total on ITEM 17a of		\$5005.98		